



Connecticut's Official Health Insurance Marketplace

**Testimony of Access Health CT  
Before the  
Connecticut General Assembly Human Services Committee  
February 26, 2015**

**House Bill 6846: AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET  
RECOMMENDATIONS FOR HUMAN SERVICES PROGRAMS**

Senator Moore, Representative Abercrombie and distinguished members of the Human Services Committee.

My name is Jim Wadleigh, Chief Executive Officer of Access Health CT, the Connecticut State Health Insurance Exchange.

Thank you for the opportunity to submit written testimony before your committee.

With the recent submission of Governor Malloy's proposed budget for Connecticut's upcoming fiscal year, there are particular recommendations which may have a direct impact on the health care coverage for many of this state's residents should they be passed. More specifically, the Governor's budget proposes to move parents of Medicaid eligible children earning whose household Modified Adjusted Gross Income (MAGI) is more than 138% of the federal poverty level (FPL) for that given year off of the state's Medicaid program.

The implication for these individuals is that they would most likely now be eligible to purchase commercial insurance through Access Health CT with financial subsidies. Many of these households will likely qualify for substantial Advanced Premium Tax Credits (APTC's) which will helped to reduce their monthly premiums. Further, those who qualify for APTCs and whose household income is below 250% of the FPL will also qualify for the Cost-Sharing Reduction Variants of

the Silver Plans (CSRs) offered through the Marketplace (see attached). These CSR plans offer reduced cost-sharing for services that persons enrolled in these plans receive without requiring them to pay more than the cost of a standard silver plan. Many of the current Medicaid population who may be effected by the Governor's proposal with the exception of pregnant women whose household MAGI is between 250% and 263% of the FPL will be eligible to enroll in the CSR plans.

It should be noted that persons who are eligible for the CSR plans will see the CSR options as the first plans they will encounter on the plan selection page. Based on the CSR level (73%, 87%, or 94% actuarial value) that they are eligible for these plan variations will replace the standard 70% actuarial value silver options on the page. The presentation of these designs as the first options a person will see offered to them should help to guide this population into these CSR designs which can provide substantial reductions to the costs associated with receiving services.

While Access Health CT does not have a position on this proposal from a public policy or state finance perspective, Access Heath CT did want to provide public testimony to indicate that should the proposal move forward, the organization stands ready to assist these individuals in attaining and enrolling in coverage.

This includes ensuring a special enrollment period (SEP) to facilitate enrollment, preparing our IT and operational systems to process activity, preparing our Call Center to assist with telephone enrollments, working with carriers to provide new member information, and working with our Department of Social Services to facilitate outreach and communication to effected members to help bring them through the transition.

I hope this helpful, and as always, my staff and I are always available to answer any further questions you may have.